IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

Applicant: Glenn C. Forrester

Group No.: 2146

Serial No.: 10/803,288

Examiner: Baturay, Alicia

Filed:

March 18, 2004

For:

METHODS AND SYSTEMS FOR RETRIEVING INFORMATION OVER A COMPUTER NETWORK

Commissioner for Patents P.O. Box 1450 Alexandria, VA 22313-1450

TRANSMITTAL

Transmitted herewith is:
 Amendment Transmittal (3 pages)
 Amendment in Response to Non-Final Office Action dated February 25, 2009 (20 pages)

STATUS

| 2. | Applicant | |
|----|-----------|-------------------------------|
| | | claims small entity status. |
| | | is other than a small entity. |

EXTENSION OF TERM

| 3. | The proceedings herein are for a patent application and the provisions of 37 C.F.R. 1.136 apply. | | | | | | | | |
|-------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|----------------------------------------------------------------------------------------------------------------------------------------------------|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--------------|------|-----------------------------|----------------------------------|--|--|--|
| | (complete (a) or (b), as applicable) | | | | | | | | |
| | (a) Applicant petitions for an extension of time under 37 C.F.R. 1.136 (Fees: 37 C.F.R. 1.17(a)-(d) for the total number of months checked below:) | | | | | | | | |
| Exte | ension for 1 | esponse w | ithin: | C | Other than small entity Fee | Small entity Fee (if applicable) | | | |
| | | \boxtimes | first month | \$ | 130.00 | \$ 65.00 | | | |
| | | | second month | \$ | 490.00 | \$ 245.00 | | | |
| | | | third month | \$ | 1,110.00 | \$ 555.00 | | | |
| | | | fourth month | \$ | 1,730.00 | \$ 865.00 | | | |
| | | | fifth month | \$: | 2,350.00 | \$1,175.00 | | | |
| | | | | | Fee Due | \$ 65.00 | | | |
| If an additional extension of time is required, please consider this a petition therefor. (Check and complete the next item, if applicable) An extension of months has already been secured. The fee paid therefor \$ is deducted from the total fee due for the total months of extension now requested. | | | | | | | | | |
| Extension fee due with this request \$65.00 OR | | | | | | | | | |
| | (b) | Applicant believes that no extension of term is required. However, this conditional petition is being made to provide for the possibility that applicant has inadvertently overlooked the need for a petition for extension of time. | | | | | | | |

FEE FOR CLAIMS

| 4. | (C | The fee for claims (37 ((Col. 1) CLAIMS | | (Col. 2) (Col. 3) | | SMALL ENTITY | | OTHER THAN SMALL ENTITY | |
|--------|---------------------------------|------------------------------------------------------------------------------------------------------------------------------------------|-----------|---------------------------------------|------------------|------------------------------|--------|----------------------------|--|
| | REMAINING AFTER AMENDMENT | | | HIGHEST NO. PREVIOUSLY PAID FOR | PRESENT EXTRA | ADDITIONAL. RATE FEE | OR | ADDITIONAL RATE FEE | |
| TOTAL | | | MINUS | | = | x \$26.00 = \$ | | x \$52.00 = \$ | |
| INDEP. | | | MINUS | <u> </u> | = | x \$110.00 = \$ | | x \$220.00 = \$ | |
| | FIRS | Γ PRESEN' | TATION OF | MULTIPLE DEP. (| CLAIM | + \$195.00 = \$ | | + \$390.00 = \$ | |
| | | | | | | TOTAL ADDITIONAL FEE \$ | OR | TOTAL ADDITIONAL FEE \$ | |
| | (a) | \boxtimes | No add | itional fee for | r Claims is | required | | | |
| | | | | | OR | | | | |
| | (b) | | Total a | dditional fee | for claims | required \$ | | | |
| | | | | FER | PAYME | NT | | | |
| 5. | \boxtimes | Attached is a check in the sum of \$ Charge Deposit Account No. 01-2384 the sum of \$ 65.00 A duplicate of this transmittal is attached. | | | | | | | |
| | | | | FEE] | DEFICIE | NCY | | | |
| 6. | \boxtimes | If any 01-23 | | al extension a | and/or fee i | s required, charge | Depos | sit Account No. | |
| | | | | | AND/OR | | | | |
| | \boxtimes | If any 2384. | addition | al fee for clai | ms is requ | ired, charge Deposi | t Acc | ount No. 01- | |
| 7. | | Other: | | | | | | | |
| | | | | | | hiel M. Fitzgerald 2 | jla | | |
| | | | | | AR | MSTRONG TEAS | | | |
| | | | | | | Metropolitan Squa | are, S | uite 2600 | |
| | | | | | | Louis, MO 63102 -621-5070 | | | |